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CONFIRMATION NO. 9235

Bib Data Sheet

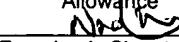
SERIAL NUMBER 10/801,136	FILING OR 371(c) DATE 03/16/2004 RULE	CLASS 714	GROUP ART UNIT 2114	ATTORNEY DOCKET NO. 550-531
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 05/31/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		
Verified and Acknowledged	Examiner's Signature 		
	Initials		
STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
TX	4	22	2

**ADDRESS**

23117

**TITLE**

Forced diagnostic entry upon power-up

FILING FEE RECEIVED 936	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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